PTO/58/08 (12-04)

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Application of Ducket Humber
10/150 580 Effective December 8, 2004 Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY · (Column 1) (Column 2) NUMBER FILED MUMBER EXTRA FOR RATE (1) RATE (\$) FEE (\$) FEE (S) BASIC FEE NA NIA 150.00 NA 300.00 (37 CFR 1.16(a), (4, 4 (c)) SEARCH FEE · NVA N/A . NA \$250 NIA \$50à (27 CFR 1 18/14, (4. or (74) EXAMINATION FEE NIA . NIA \$100 NA **\$200** (3) CFR 1.16(4, (4), or (4)) TOTAL CLASS X\$ 25 .. X\$50 (37 CFR 1.16(1)) minus 20 = OR INDEPENDENT CLAIMS X100 X200 (37 CFR & 15(h)) E aunion If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each (37 CFR-1.16(e))--additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). +180= +360= MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) *If the difference in column 1 is less than zero, enter "O" in column 2, TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Calumn 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT. RATE (1) ADDE RATE (S) ADDI-3/20/06 AFTER PREVIOUSLY **EXTRA** TIONAL TIONAL FEE (\$) と WENDMENT **PAID FOR** FEE (\$) Total Minus <u>85</u> ENDME Ø XS-25 OF OF R LIES X\$50 OR independent Q7 CFR LIST-II Minus Ø X100 X200 OR Application Size Fee (37 CFR 1.18(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) 4180= · +360= OR TOTAL TOTAL ADD'L FEE OR ADO'L FEE رع *K* (Column 1) (Column 2) (Column 3) CLAUNS HIGHEST PRESENT REMAINING NUMBER 8 RATE (S) ADDI-RATE (\$) ADDIlοψ AFTFR PREVIOUSLY EXTRA TIONAL MENT MENDMENT PAID FOR FEE (1) FEE (1) Total Minus 35-35 ON COM LINE X\$ 25 X\$50 ٠, OR Independent profe Lugg Minus Lo 3 X100 X200 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1,160) +360± +180= OR TOTAL TOTAL ADO'L FEE ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the Tighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the Tighest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the Tighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The Tighest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1 This collection of information is required by 97 CFR 1.16. The information is required to obtain or retain a barrell by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief infermetton Officer, U.S. Patient and Trademark Office, U.S. Depertment of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS-TO THIS

PATENT APPLICATION FEE DETERMINATION RECORD

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.